

STATE OF

South Carolina Department of Insurance

Capitol Center 1201 Main Street, Suite 1000 Columbia, South Carolina 29201 HENRY McMASTER

Governor

RAYMOND G. FARMER
Director

Mailing Address: P.O. Box 100105, Columbia, S.C. 29202-3105 Telephone: (803) 737-6095

South Carolina Service Contract Surety Bond

Bond Number

KNOW ALL MEN BY THESE PRESEN	ITS, that we	as
Principal, of	and and are held and firmly bound unto(\$) Dollars d ourselves, and each and every on	the State of South s, to the payment of ne of us, our heirs,
Effective Date	Expiration Date	
Sealed with our seals and dated at in the year of our Lord two thou	this _ sand and	day of
WHEREAS, Section 38-78-30 of the Code of contract service administrator, before being bond in the amount of	licensed to do business in this State,	
AND WHEREAS,administrator in accordance with the laws of(\$(\$	f this State and desires to file such a	bond in the sum of
file such bond.		
NOW, the condition of the above bond is such who shall sustain loss as a result of (a) the requirements of Chapter 78, (b) the Principa	he Principal's violation of or failure	to comply with the

NOW, the condition of the above bond is such that if the above bound Principal shall pay any person who shall sustain loss as a result of (a) the Principal's violation of or failure to comply with the requirements of Chapter 78, (b) the Principal's failure to properly transmit any payment received for transmission to an insurer, or other person, (c) the Principal's misapplication or misappropriation of funds received by it, or (d) any act of fraud or dishonesty committed by the Principal in connection with contract services, then the above bond is to be void and of none effect; or else to remain of full force and virtue.

It is understood and agreed that in no event shall the aggregate liability of the Surety under this bond for any and all payments due to one or more claimants exceed the penal sum of this bond regardless of the number of years the bond shall remain in effect.



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Surety's liability hereunder, as to the future only, may be terminated:

- (a) By notice in writing by the surety to the Director of Insurance of the State of South Carolina stating when, not less than sixty (60) days and after obligations to contract holders in the State of South Carolina have been discharged and upon written authorization from the Director of Insurance of the State of South Carolina to said surety, the surety's future liability shall terminate; or
- (b) Upon written notification from the Director of Insurance of South Carolina to the Surety directing the bond's termination.

IN WITNESS whereof, Principal and Surety have executed and sealed this bond in the manner and form following:

the presence of two with 1	•	
2		
		Principal
the presence of two witn	passas as to Suraty	
1	•	
2		Surety y:

(continued on next page)



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STATE OF		_	
COUNTY OF			
Personally appeared before me, that he saw the within mentioned	(Witnesses	to Principal)	, who, being duly sworn, says
bond for the use and purposes therei			
(Signature of Above Witness to Principal)	_		
Sworn to and subscribed before me t	:his	day of	, 20
(Notary Public)	_		
STATE OF			
COUNTY OF			
Personally appeared before me,	(one of Witn	esses to Surety)	, who, being duly sworn, says
that he saw the within mentioned	(S	Surety)	by r deed, deliver the within written
(officer of the Surety) bond for the use and purposes therei	_		
(Signature of Above Witness to Surety)	_		
Sworn to and subscribed before me t	this	day of	, 20
(Notary Public)	_		